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NCR National Corporate Research (Hong Kong) Limited, a Hong Kong Limited Company

NCR National Corporate Research (UK) Limited, Registered in England and Wales, Registry # 8010712

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Date: 09/08/2016	Account #: I20000000088
Name: KEN HOWELL	
Reference #: C017031	
ENTITY NAME: VAN TIBOLLI BEAUTY CORP.	
Articles of Incorporation/Authorization to Transact Business	
Amendment	
Annual Report	
Change of Agent	
Reinstatement	
Conversion	
Merger	
Dissolution/Withdrawal	
Fictitious Name	
Other:	
Authorized Amount: #35-	
Signature:	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	visions of sections 607.0502, 6 is submitted for a corporation					
in order to	change its registered office of			-		
1. The name of the	corporation:	VAN TIB	OLLI BEA	UTY CO	DRP.	
2. The principal off 4800 NW	ice address:	E FOR	r LAUDER	DALE	FL	33309
3. The mailing addr	ess (if different):	E FOR	r Lauder	DALE	FL.	33309
	ation/qualification: January				090000	
	eet address of the current reginent of State: (If resigned, enter		d registered off	ice on file w	rith the	
	Corporation	Service (ompany	<u> </u>	200	•
	1201 I	lays Stre	et		٠	
_	Tallahassee	, FL 323	01-2525			
(if changed):	eet address of the new register	-	_	_		A II: 12
	15 North Calhoun	-				2
	allahassee, FL 3	Box NOT acceptable	0		,	
	of its registered office and the identical.		of the business	s office of it	s register	ed agent,
Such change was a authorized by the b	uthorized by resolution duly a card, or the corporation has b	dopted by its leen notified in	poard of directo writing of the	ors or by an change.	officer so)
Signature of	an officer of director	- <u>VI</u>	AN TIBOL	LI CE	0	
I hereby accept the I further agree to co performance of my agent. Or, if this do hereby confirm that	appointment as registered as omply with the provisions of a duties, and I am familiar with ocument is being filed merely the corporation has been no	ent and agree all statutes rela and accept the to reflect a ch tified in writin	to act in this cative to the pro the obligation of ange in the reg g of this chang	apacity. per and con my position istered office e.	aplete as regis se address	tered s, I
Seart	an	•	9/8/2010			
,	of Registered Agent	,		Date		
If signing on behalf	of an entity:					

Sean Honan, Assistant Secretary

Typed or Printed Name

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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